

Vertebrobasilar insufficiency. Diagnostic and treatment algorithms

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The vertebrobasilar vessel (VBS) includes two vertebral arteries that merge at the base of the brain into one basilar, and supplies blood to one third of the brain:

- all parts of the brain stem (medulla oblongata, varolian brain, midbrain) and upper segments of the cervical spinal cord;
- the cerebellum;
- the posterior parts of the cerebral hemispheres: the occipital lobe is partially parietal, the mediobasal parts of the temporal lobe, part of the optic hillock and the hypothalamus.

Vertebrobasilar insufficiency (VBI) is a reversible dysfunction of the brain caused by a decrease in blood supply to the areas fed by the vertebral and main arteries.

VBI, according to the international classification, is attributed not to stroke, but to "transient transient cerebral ischemic attacks."

The main reasons for the development of VBI:

1. Atherosclerosis, which causes stenosis or complete occlusion of one of the vertebral arteries.
2. The tortuosity of the vertebral arteries due to arterial hypertension.
3. Congenital anomaly of the vertebral artery.
4. Consequences of trauma to the vertebral artery in the form of wall dissection, which can be observed with whiplash injuries.
5. Compression of the vertebral artery by the osteophyte when it passes through bone canal.
6. VBI can also occur with vascular lesions outside the VBS;
 - with subclavian style syndrome;
 - with blockage of both internal carotid arteries;
 - with severe disorders of general hemodynamics.

Clinical symptoms of VBI:

one. Frequent attacks dizziness with nausea, less often vomiting lasting for several days.

2. Instability when walking and standing, sometimes dynamic ataxia, indicating transient ischemia of the cerebellar structures.

3. Visual disorders: blurred vision, spots, zigzags, less often - transient hemianopsia, indicating ischemia of the occipital lobes of the brain.

4. Decreased memory on current events, occasionally attacks of transient global amnesia, for several hours the patient's working memory (the ability to memorize) is disturbed, he is confused, disoriented. These phenomena resemble Korsakov's syndrome and are associated with transient ischemia of the mediobasal parts of the temporal lobes, primarily the hippocampus and mamillary bodies.

five. Attacks of disorientation in the surrounding space: in a familiar

the patient loses the opportunity to find the house he needs, a store, does not know how to properly transit in the subway, etc.

6. Syncope conditions drop attacks.

7. Vegetative disorders (profuse sweat, pale skin), sometimes accompanying attacks of dizziness.

eight. Cochleovestibular syndromes - a combination of vestibular disorders (dizziness, instability) with tinnitus and hearing loss is one of the most common manifestations of VBI.

VBI treatment

Treatment of atherosclerosis is carried out according to the proposed scheme with an emphasis on lifestyle and diet. The use of statins (drugs to lower blood cholesterol).

Vasoactive agents:

- Vinpocetine 0.005 mg 2 tablets 3 times for several months;
- Instenon 1 tablet 2-3 times a day for 1 month;
- Cinnarizine 0.025 mg 1-2 tablets 3 times a day for several months;

- Vasobral, by mouth 2-4 ml with a small amount of water 2 times a day with meals for 1-2 months.

Means that suppress the excitability of the vestibular centers:

- Betahistin-betaserc 16 mg 3 times a day for 1-3 months;
- Vegetotropic drugs - bellaspon, bellataminol, belloid 1-2 tablets 3 times a day for 1 month;
- a psychotropic drug that suppresses the excitability of the emetic and vestibular centers;
- thiethylperazone 1 tablet 3 times a day for 1 month.

Neurotrophic drugs:

- Cytoflavin (succinic acid), intravenous drip;
- Actovegin 400-800 mg intravenously drip for at least 10 days, then 1 tablet 3 times a day for 1.5 months;
- Glycine 2 tablets 3 times under the tongue, the dose can be increased to 1.0-2 g per day;
- Gliatilin IV drip and inside;
- Semak intranasally;
- Cerebrolysin 5 mg intramuscularly or 10 mg intravenous drip 20-30 injections;
- Piracetam 2.4-4.8 g per day in 2 divided doses for several months;
- drugs gingo-biloba, which have antiplatelet, vasodilating and neuroprotective properties, 1 tablet (0.04 mg) 3 times a day for 1-2 months;
- Fezam 1 tablet 3 times after meals;
- Ebselen 150 mg per day.

Disaggregants:

- Acetylsalicylic acid 1 mg per 1 kg of body weight per day;
- Pentoxifylline 0.4 mg 1-2 times a day;
- Detralex 1 tablet 2 times a day;
- Courantil;

- Cardiomagnet (aspirin + magnesium hydroxide).

Antioxidants: Emoxipin 1% 15.0, Mexidol, Vitamin E, Unithiol, Aplegin.

Exercise therapy every day, a half-hour walk will force the body to produce a biologically active substance, absolutely analogous to the tissue activator of plasminogen. This confirms the aphorism: "movement replaces any medicine, but no drug replaces movement."

VBN - syndromic diagnosis, polyetiologic disease.

Symptoms of VBI can be with severe cerebral sclerosis, heart failure, severe osteochondrosis of the spine, with intoxication syndrome, severe somatic pathology.

In polyclinics, doctors rarely make such a diagnosis, and patients get sick and do not know who else to turn to.

In these cases, the diagnosis by the method of vegetative resonance test (ART) has a great advantage. It allows not only to establish this diagnosis, but also to identify the causes aggravating the VBI syndrome.

In the study by the ART method, in all cases, a high psychological load, exhaustion and high tension of the immune and endocrine systems are revealed, in many cases geopathogenic loads are tested.

Testing reveals:

Opisthorchiasis (worms of the renal-biliary system)	fifty%
Ascariasis	thirty%
Paragonimiasis	10%
Schistosomiasis (Mansoni)	13%
Strongyloidosis	thirty%
Intestinal fluke	37%
Lambiosis	fifteen%
Trichomoniasis	35%
Helicobacter pylori	fifteen%
Chlamydia	59%
Ureoplasmosis	25%
Gardnerellosis	fifteen%
Streptococci	eleven%
Herpes simplex.	42%
Epstein Barra	10%
Candidiasis	92%

Depending on the identified concomitant infections, the treatment tactics will be different, but the main point in all cases will be the cleansing of the body according to various options depending on the somatic state (according to the book by OI Eliseeva "The Practice of Cleansing and Restoring the Body").

In the course of treatment, drugs from the Medicamentous Selector of the ART apparatus and bioresonance drugs are prescribed: Bach Flowers, OBR drugs, BSR drugs.

EPT of identified microorganisms is carried out along the tested meridians, BRT is carried out along the tested meridians, drug therapy, if necessary, immunocorrectors, dietary supplements, homeopathy, ozone therapy.

In our Center, 52 patients with various clinical syndromes of VBI were observed, with an unspecified diagnosis in polyclinics, of whom we diagnosed VBI in 31 cases on ART. 21 patients had other diseases.

The use of complex multiresonance treatment allowed 21 patients to return to work and feel practically healthy, 10 of them are undergoing homeopathic treatment and follow-up.

Conclusions:

1. ART allows to diagnose VBI on time, which is difficult to diagnose disease by conventional medical methods.

2. Complex treatment in combination with multi-resonance therapy allows you to significantly improve the patient's well-being.

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